

Standard Form No. 1034—Revised

Form prescribed by

Comptroller General, U. S. Approved For Release 2007/08/15 : CIA-RDP64-00360R000600040192-0

September 7, 1950

(Gen. Reg. No. 51, Supp. No. 11)

(Amended February 20, 1952)

D. O. Vou. No. \_\_\_\_\_

Bu. Vou. No. 2302

PUBLIC VOUCHER FOR PURCHASES  
SERVICES OTHER THAN PERSONAL

U. S. COST REIMBURSABLE

(Department, bureau, or establishment)

Voucher prepared at \_\_\_\_\_

(Give place and date)

THE UNITED STATES, Dr.,

Payee's Account No. \_\_\_\_\_

To \_\_\_\_\_

(Payee)

PAID BY

COPY # 5  
DOD-1226-59  
COPY /OF 2

No. and Date of Order	Date of Delivery or Service	(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)  Discount Terms	ARTICLES OR SERVICES	QUANTITY	UNIT PRICE		AMOUNT	
					Cost	Per	Dollars	Cts.
			Costs				\$8	10
PAYMENT:								
Complete <input type="checkbox"/>								
Partial <input type="checkbox"/>								
Final <input type="checkbox"/>								
Use continuation sheet(s) if necessary								
Shipped from	to	Weight	Government B/L No.	Total	\$8	10		
I certify that the above bill is correct and just and that payment has not been received.			(Payee must NOT use this space)					
STATINTL	(Sign original only)		Differences					
Date 2-2-59	*Payer	Title	Amount verified; correct for (Signature or initials) EL		\$	8	10	
Contract No. A-701	Date	Req. No.	Date					Invoice Rec'd.

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

†Approved for \$ \_\_\_\_\_

† \_\_\_\_\_ (Authorized Certifying Officer)

By \_\_\_\_\_

SIGN  
ORIGINAL  
ONLY

Title \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. \_\_\_\_\_ dated \_\_\_\_\_, 19\_\_\_\_\_, for \$\_\_\_\_\_ on Treasurer of the United States in favor of \_\_\_\_\_  
Cash, \$ \_\_\_\_\_, on \_\_\_\_\_, 19\_\_\_\_\_. Payee \_\_\_\_\_  
(Sign original only)

\* When a voucher is signed or receipted in the name of a company or corporation, the name of the person signing or receiving the company or corporate name is written in the space above the signature. Example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.

† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$\_\_\_\_\_ and over his official title."

Title \_\_\_\_\_

16-22900-6

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## THE RAMO-WOOLDRIDGE CORPORATION

FORM STL 660

## ACCOUNTS PAYABLE

WEEKLY DET DISTR DATE 1/18/59

BATCH				INVOICE NUMBER	PURCHASE ORDER	CHECK NUMBER	PAYMENT DATE	Vendor Number	GROSS AMOUNT	DISCOUNT	Tax Class Cost Element	TR. CODE	COST CENTER	CHARGE DISTRIBUTION	M.I.O.	S.O.	Work Order	NET AMOUNT	
No.	Mo.	Day	Yr.																
20	01	13	9		19165	4071		01 30	1531			1	50	25	00	00	12501	5046 03	350*
29	01	14	9		15575	4093		01 30	1516			1	50	25	00	00	12501	5046 03	350**